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**FACSIMILE TRANSMISSION**

August 9, 2005

TO: U.S. PATENT AND TRADEMARK OFFICE

ATTN: Examiner Anh T. N. Vo

FAX NO.: 571-273-8300

TELEPHONE:

FROM: Stephen T. Boughner

RE: **AMENDMENT WITH FEE TRANSMITTAL**

SERIAL NO.: 10/617,252

OUR DOCKET: 1293.1914

NO. OF PAGES (Including this Cover Sheet) 11


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S&amp;H Form: (02/05)

<b>REPLY/AMENDMENT FEE TRANSMITTAL</b>		Attorney Docket No.	1293.1914		
		Application Number	10/617,252		
		Filing Date	July 11, 2003		
		First Named Inventor	Kwang-ryul KIM et al.		
		Group Art Unit	2861		
AMOUNT ENCLOSED	450.00	Examiner Name	Vo, Anh T. N.		
<b>FEE CALCULATION (fees effective 12/08/04)</b>					
CLAIMS AS AMENDED	Claims Remaining After Amendment	Highest Number Previously Paid For	Number Extra	Rate	Calculations
TOTAL CLAIMS	23	- 26 =	0	X \$ 50.00 =	\$ 0.00
INDEPENDENT CLAIMS	3	- 3 =	0	X \$ 200.00 =	0.00
Since an Official Action set an <u>original</u> due date of <u>June 9, 2005</u> , petition is hereby made for an extension to cover the date this reply is filed for which the requisite fee is enclosed (1 month (\$120)); (2 months (\$450)); (3 months (\$1,020)); (4 months (\$1,590)); (5 months (\$2,160));					450.00
If Notice of Appeal is enclosed, add (\$500.00)					
If Statutory Disclaimer under Rule 20(d) is enclosed, add fee (\$130.00)					
Information Disclosure Statement (Rule 1.17(p)) (\$180.00)					
Total of above Calculations =					\$ 450.00
Reduction by 50% for filing by small entity (37 CFR 1.9, 1.27 & 1.28)					
<b>TOTAL FEES DUE =</b>					\$ 450.00
(1) If entry (1) is less than entry (2), entry (3) is "0". (2) If entry (2) is less than 20, change entry (2) to "20". (4) If entry (4) is less than entry (5), entry (5) is "0". (5) If entry (5) is less than 3, change entry (5) to "3".					
<b>METHOD OF PAYMENT</b>					
<input type="checkbox"/> Check enclosed as payment. <input checked="" type="checkbox"/> Charge "TOTAL FEES DUE" to the Deposit Account No. below. <input type="checkbox"/> No payment is enclosed.					
<b>GENERAL AUTHORIZATION</b>					
<input checked="" type="checkbox"/> If the above-noted "AMOUNT ENCLOSED" is not correct, the Commissioner is hereby authorized to credit any overpayment or charge any additional fees necessary to: Deposit Account No. <u>19-3935</u> Deposit Account Name <u>STAAS &amp; HALSEY LLP</u>					
<input checked="" type="checkbox"/> The Commissioner is also authorized to credit any overpayments or charge any additional fees required under 37 CFR 1.16 (filing fees) or 37 CFR 1.17 (processing fees) during the prosecution of this application, including any related application(s) claiming benefit hereof pursuant to 35 USC § 120 (e.g., continuations/divisionals/CIPs under 37 CFR 1.53(b) and/or continuations/divisionals/CPAs under 37 CFR 1.53(d)) to maintain pendency hereof or of any such related application.					
SUBMITTED BY: STAAS & HALSEY LLP					
Typed Name	Stephen T. Boughner			Reg. No.	45,317
Signature				Date	August 9, 2005

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